

Equity White Paper Series

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Disparities in Access and Opportunity for Persons with Disabilities in Portland

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ABSTRACT

Disparities in Access and Opportunity for Persons with Disabilities in Portland discusses key equity concerns for persons with disabilities, a population that makes up approximately 15-20% of our region's residents, including more than a third of seniors. The paper highlights disparities affecting persons with disabilities by examining six issue areas: housing, infrastructure, transit, education, employment, and health outcomes. It also discusses intersecting issues of race and gender.

ABOUT THE WHITE PAPER SERIES

By sponsoring a series of white papers by local issue experts, CLF hopes to promote dialogue and discussion about a range of regional equity issues. The papers explore issues addressed in the Regional Equity Atlas 2.0 in greater depth, placing the Equity Atlas within a broader policy context. Proposals for papers are welcome. Interested authors should contact Scotty Ellis at <u>scotty@clfuture.org</u>

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Introduction

On average, 15-20% of the population is persons with disabilities. Persons with disabilities are members of every racial/ethnic group, every age group, and every socioeconomic classification. Disability comes in many forms and can impact every aspect of life. Persons with disabilities have historically been marginalized by society, and much work remains to be done to level the playing field and provide equal opportunity for those affected by disability.

The presence of disability often contributes to economic hardship for persons with disabilities and their families, which means that persons with disabilities are disproportionately likely to be poor. Disability is often a normal part of the aging process, and thus persons with disabilities are also overrepresented in the older adult population.

Persons with different types of disabilities (physical, sensory, intellectual, psychosocial) have very different support needs and have the right to receive support in order to participate in community life on an equal basis with others.ⁱ Equity for persons with disabilities requires understanding and addressing the barriers that undermine access to opportunity for persons with disabilities and that limit their participation in all aspects of community life.

This paper highlights the disparities affecting persons with disabilities in the Portland metro region through a brief examination of six key issue areas: housing, transit, pedestrian infrastructure, education, employment, and health outcomes. The Regional Equity Atlas maps help to illuminate some of these disparities. However, given challenges with the data, explained below, the Equity Atlas cannot provide a complete picture of the myriad disparities faced by persons with disabilities. For this reason, the paper supplements the Equity Atlas maps with additional data from local, national, and international sources.

Challenges with the data

Gathering data on persons with disabilities has some unique challenges. First, while various agencies collect data across different sectors, there is no common definition of disability. Second, we cannot track trends because the American Community Survey (ACS), which collects disability data for the US Census, has revised its disability questions several times over the past decade. The ACS website acknowledges, "the new ACS disability questions should not be compared to the previous ACS disability questions or the Census 2000 disability data."ii Third, the 2010 Census did not collect data on disability, and the sample sizes for ACS data are too small to enable us to effectively map the disability data at a census tract or neighborhood level.ⁱⁱⁱ Fourth, it is very difficult to gather employment data since employers are not legally allowed to ask about disability status during the recruitment and hiring process. While this prohibition helps prevent employment discrimination, it makes data collection more difficult.

Regional data on disability

Table 1 (right) provides an overall summary of the percentage of the region's population in each county with a disability, by age, based on the most recent ACS 3-year estimates^{vi}:

The ACS data also provide information about the percentage of each county's population, by age, that is affected by specific types of disabilities^v (**Table 2**).

TABLE 1

Persons with Disabilities by Age and County

County	Age 5-17	Age 18-64	Age 65 and Over		
Clackamas County	6%	9%	35%		
Clark County	6%	11%	37%		
Multnomah County	4%	8%	33%		
Washington County	6%	9%	40%		

TABLE 2

Disability Characteristics among the Population Age 5 to 65 Years & Over

	Population 5 to 17 Years			Population 18 to 64 Years					Population 65 Years and Over								
	Hearing	Vision	Cognitive	Ambulatory	Self-Care	Hearing	Vision	Cognitive	Ambulatory	Self-Care	Independent Living	Hearing	Vision	Cognitive	Ambulatory	Self-Care	Independent Living
Clackamas County	1%	5%	1%	1%	1%	2%	1%	4%	4%	2%	3%	16%	6%	9%	23%	9%	16%
Clark County	1%	5%	1%	1%	1%	2%	1%	6%	5%	2%	4%	18%	7%	11%	23%	10%	16%
Multnomah County	1%	3%	1%	1%	1%	2%	1%	4%	4%	1%	3%	15%	6%	10%	20%	7%	15%
Washington County	1%	5%	1%	1%	1%	2%	2%	5%	4%	2%	3%	16%	8%	12%	25%	10%	19%

The Portland Commission on Disability (PCOD) has developed additional estimates of persons with disabilities for the city of Portland by applying national statistics to Portland's demographic data. While it is impossible to estimate the overall percentage of the city's population broken out by type of disability, national studies on the percentage of persons with disabilities by race enable us to estimate the numbers of persons with disabilities in Portland by applying the national percentages to Portland's 2010 Census race data (**Table 3**).

This analysis suggests that approximately 100,000 people in the city of Portland are persons with disabilities, representing 15-20% of the city's population.

Interestingly, there are more persons with disabilities (of all races) than the number of people in any individual racial minority group. At the same time, the wide ranges for some populations and narrow ranges for other populations cited in the different national studies suggest that there is no consensus regarding the definition of a person with a disability.

Equity concerns for persons with disabilities

Housing

One of the primary equity concerns for persons with disabilities in our region is the availability and distribution of accessible housing options. The vast majority of our housing supply is inaccessible to persons with mobility impairments. Most single-family housing utilizes traditional design elements such as stepped entrances and multilevel layouts that are problematic or simply unusable for those who use assistive devices.

TABLE 3

Persons with Disabilities in Portland by Racevi

Race	Number and percent- age of population (2010 Census)	Percentage of persons with disabilities (range)	Number of persons with disabilities (range)		
Black or African- American	36,778 (6.3%)	17.5-32.0%	6,436-11,769		
Asian	41,448 (7.1%)	12.4%	5,140		
Hispanic or Latino	54,840 (9.4%)	10.0-13.0%	5,484-7,129		
Native American or Alaska Native	5,837 (1.0%)	Data not available ^{vii}	Data not available		
Native Hawaiian or Pacific Islander	2,918 (0.5%)	Data not available	Data not available		
White	444,254 (76.1%) 15.5-21.0%		68,859–93,293		
Total ^{viii}	583,776	14.9-20.3%	85,919-117,331		

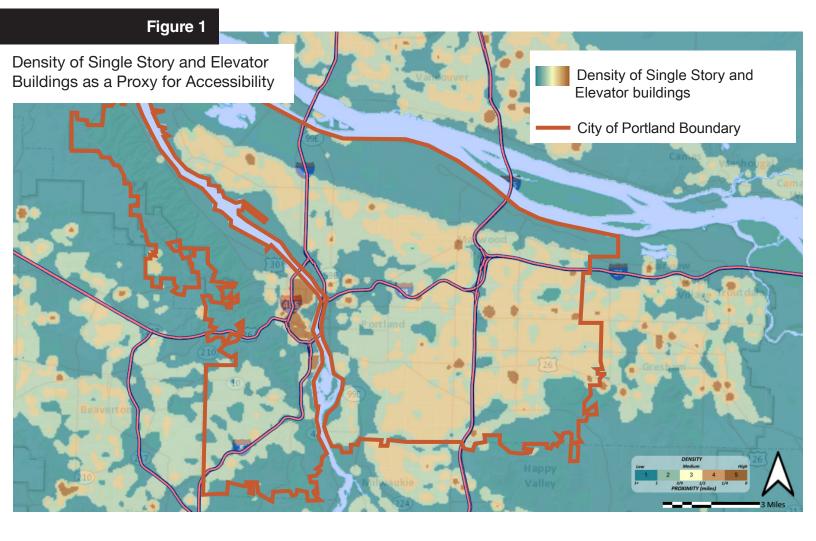
It often includes internal design deficiencies such as narrow doorways and insufficient clearances that are impossible to navigate for persons who use wheelchairs. Newer multifamily construction is generally more accessible, but often still lacks accessible design features that make housing truly usable for persons with more severe mobility impairments.

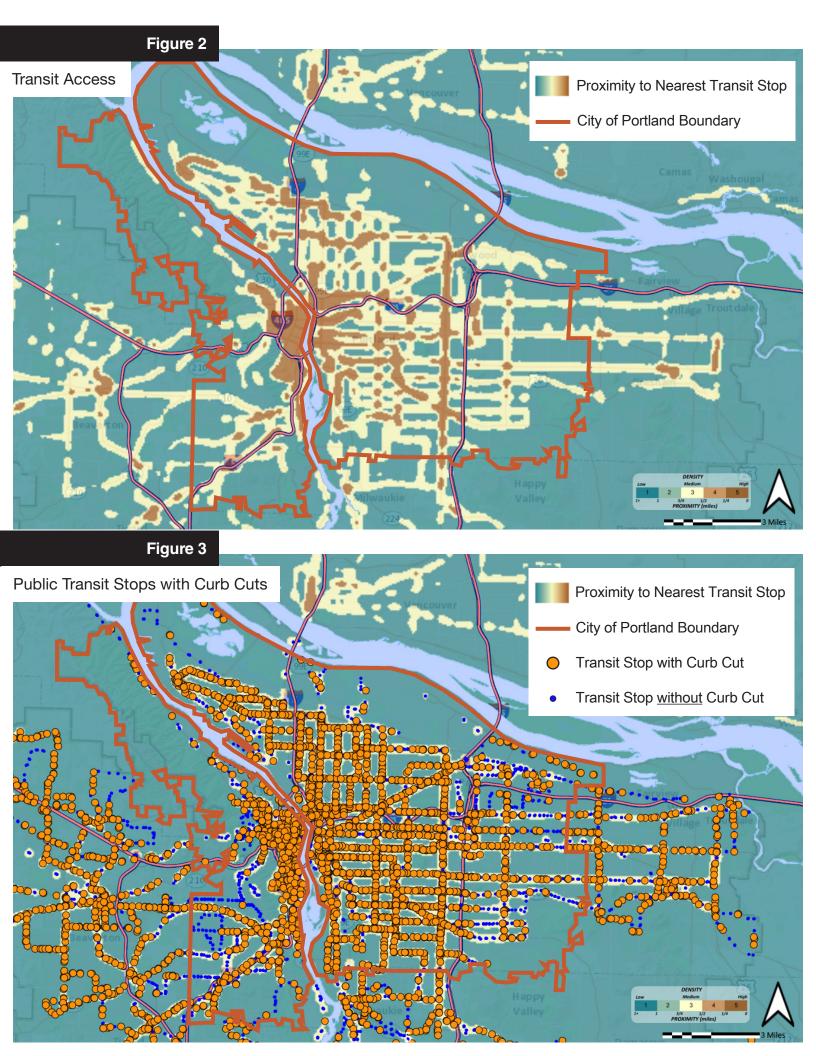
Another major barrier to equity for persons with disabilities in housing is affordability. Given that persons with disabilities are disproportionately likely to be low income, the affordability of accessible housing options is a critical concern. As one would expect, newer, more accessible housing options are often economically out of reach for persons with disabilities because of the correspondingly higher market rate of those properties.

The location of accessible housing is also an important consideration. Affordable, accessible housing options

should be created in service-rich areas with good, convenient access to public transit. However, land use priorities and zoning codes in these areas often favor less affordable and accessible housing options.

Mapping the geographic distribution of physically accessible housing in the region was a priority for the Equity Atlas project, but comprehensive data on accessible housing do not exist. Relying on the limited data that are available, the Equity Atlas shows the location of single story housing and multi-family buildings with elevators as proxies for housing that is accessible (**see Figure 1**). These proxies are somewhat useful but do not take into consideration whether there are steps to the front door or any accessibility features within the homes. Even in an elevator building, if any interior doorways are not wide enough to accommodate a wheelchair, the housing is inherently inaccessible.





Design experts have developed guidelines on what is known as "universal design" to enable people to carry out accessibility audits, which identify barriers that prevent access and use by persons with disabilities. These audits also serve to inform designers about how to construct spaces that are completely accessible for persons with all kinds of disabilities.^{ix} These guidelines should be incorporated into regional design requirements, and data on the presence of these features should be collected to enable us to better understand the availability and distribution of accessible housing across the region.

Transportation

Public transit is often the preferred, or only, transportation option for persons with disabilities. To be equitable for persons with disabilities, both the public transit system itself (buses, light rail, streetcar) as well as the pedestrian infrastructure that connects accessible housing options and transit options, must be accessible. Transit must also have sufficient capacity to be able to effectively serve persons with disabilities; overcrowded transit vehicles, the inaccessibility of transit infrastructure (stations, stops, and amenities), the lack of audible stop announcements, and the inaccessibility of the transit tracker system for persons with visual impairments create extreme barriers to transit equity for persons with disabilities. These barriers also lead more persons with disabilities to utilize paratransit services. And while paratransit is a vital service for people unable to use fixed route buses and trains, it is not a substitute for access to the rest of the transit system.

The Equity Atlas maps provide some insights into transit accessibility for persons with disabilities across the region. The maps below show (a) proximity to public transit; (b) the presence of curb cuts and sidewalks near transit stops; and (c) paratransit lift requests and ramp deployments. However, due to lack of available data, the Equity Atlas maps do not provide complete insights into this complex issue. For example, the maps focus primarily on accessibility features for persons with physical disabilities, but we also need to consider accessibility for persons who are deaf or blind or who have cognitive impairments.

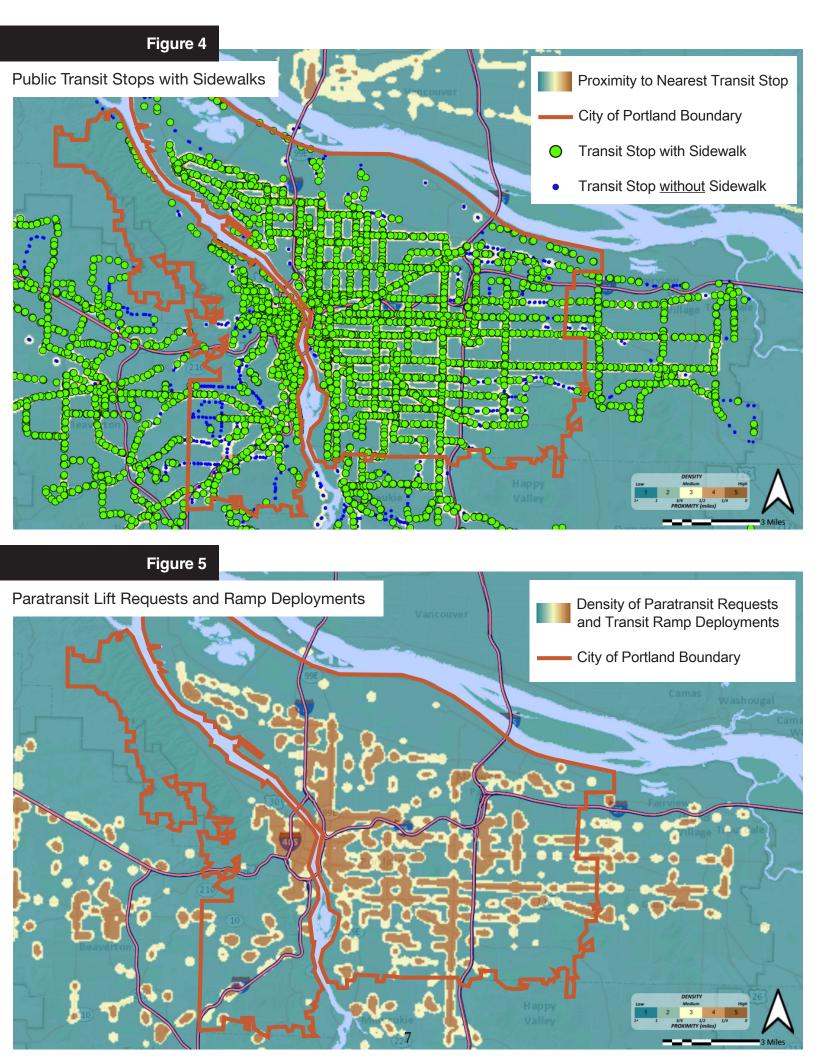
Figure 2 shows access to transit (measured by proximity to transit stops and the frequency of rides through the stops). The darkest brown areas have the best access. The map indicates that the areas closest to downtown Portland have the best access to public transit, along with a few key transportation corridors on the city's east side. Outer east Portland and southwest Portland tend to have the worst transit access.

Figure 3 indicates whether transit stops have curb cuts. The blue dots represent all transit stops without curb cuts, while the orange dots represent all transit stops with curb cuts. The map suggests that transit stops in and near downtown and Portland's inner east side are more accessible than those in outer east Portland, north Portland and parts of the west side.

Figure 4 shows the presence of sidewalks at public transit stops (the green dots represent transit stops with sidewalks and the blue dots represent transit stops without sidewalks). The map demonstrates that areas closest to downtown and on Portland's inner east side have the best sidewalk coverage at transit stops, while parts of outer east Portland and southwest Portland have the worst coverage.

Paratransit provides point-to-point service for people unable to use the bus, light rail or streetcar. It is an essential service, but there are often long wait times for those who use the service.

Figure 5 shows the most common locations for requests for paratransit lift vehicles as well as requests for a bus or train ramp to be deployed (usually to allow for wheelchair access). The darker the brown, the more often paratransit or a ramp deployment is requested.



The map indicates that paratransit and ramp deployment requests are concentrated in Portland's east side and downtown areas. It is notable that several areas with high rates of requests do not have consistent access to curb cuts near transit stops. This suggests that some people with mobility limitations may need to use paratransit because their nearest public transit stops are not accessible.

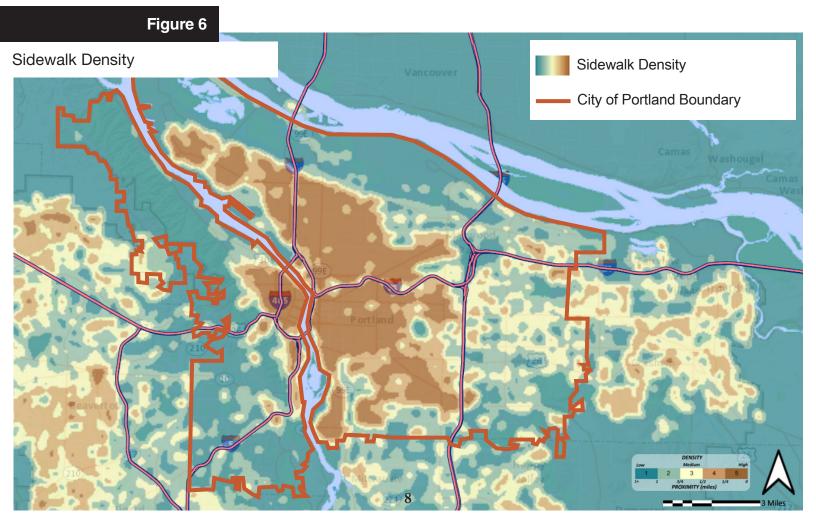
Pedestrian Infrastructure

Accessible pedestrian infrastructure is essential for safe mobility for persons with mobility and sensory impairments. Well-maintained sidewalks, curb cuts, crosswalks and other such pedestrian infrastructure are necessary for persons with disabilities to safely access transit, essential services and shopping, and social/ recreational opportunities in the community. Despite substantial public investment in such infrastructure in service rich areas such as city centers and neighborhood cores, much of our region's pedestrian infrastructure is either aging or nonexistent. In outer east Portland and southwest Portland, neighborhood streets often lack sidewalks. In neighborhoods throughout the region, aging sidewalks are often impassable for persons using mobility devices or persons who are blind or have low vision due to tree roots and other serious damage to the infrastructure.

Investment in pedestrian infrastructure is critical to achieving equity for persons with disabilities, as accessible pedestrian amenities connecting accessible housing options with accessible transit and services are essential for persons with disabilities to fully participate in community life.

The Equity Atlas's map of sidewalk density provides some initial insights into accessible pedestrian infrastructure, but as with the other Equity Atlas maps, the utility of the map is somewhat limited by the available data. For example, some neighborhoods that are highlighted in the map as having high levels of sidewalk density are relatively impassible for persons with mobility and sensory impairments because of their steep inclines, uneven surfaces, narrowness, or lack of curb cuts.

Figure 6 shows the density of sidewalks in Portland. The darker the color, the better the sidewalk coverage.



The map indicates that the areas with the most continuous sidewalk coverage tend to be concentrated in downtown Portland and the city's east side neighborhoods between the river and I-205.

Education

National data indicate that students with disabilities have disproportionately worse attendance and graduation rates than their non-disabled peers. According to the American Youth Policy Forum and the Center on Education policy: "Only 55% of students with disabilities leave high school with a standard diploma, compared with three-fourths of the general student population. Young persons with disabilities still drop out of high school at twice the rate of their peers."x

To more fully understand the barriers to education for the region's students with disabilities, we would need to

know the extent to which administrators and teachers have the capacity and resources to create inclusive learning environments, the effectiveness of the special education programs available in the schools, and the levels of physical accessibility of the region's schools. Unfortunately, none of these data are available in a comprehensive format across the region's school districts.

According to the National Center for Education, 13% of all public school students receive special education services.^{xi} The Oregon Department of Education releases "Special Education Report Cards" by district. The most recent available data are from 2011-2012.^{xii} Those data and data from an audit in 2013 reveal striking disparities in graduation rates for students with disabilities.^{xiii} (It is also worth noting the audit indicates that 15% of the student population in Portland is persons with disabilities.)^{xiv}

TABLE 4

Graduation Rates, Dropout Rates, and Inclusion in Regular Classrooms for Students with Disabilities in Portland and David Douglas School Districts

	Portland Public School District special education students	David Douglas School District special education students	General student population (all Multnomah County school districts)				
Graduation rate: 4 year cohort rate	30.8%	40.2%	64.7% ^{xv}				
Graduation rate: 5 year cohort rate	32.4%	54.0%	67.1% ^{xvi}				
High school dropout rate	6.3%	5.1%	5.7% ^{xvii}				
Students included in regular class 80% or more of day	75.2%	79.5%	N/A				
Students included in regular class less than 40% of day	11.0%	10.1%	N/A				

The low dropout rate for students with disabilities appears to be at odds with their low graduation rates. If the vast majority of students with disabilities (75-80%) are in the classroom 80% of the time, why do so few students with disabilities graduate (roughly half as many as non-disabled students)? Factors could include lack of sufficient individual attention, lack of support from teachers or other students, lack of information in accessible formats (alternative texts, screen readers, sign language interpreters), and difficult home environments.

Employment and Income

Persons with disabilities often face significant barriers in accessing living wage employment. Sufficient data are not available to enable us to understand the employment situation for persons with disabilities in the Portland metro region, but national data make it clear that persons with disabilities have disproportionately high rates of unemployment. The Bureau of Labor Statistics' most recent report, based on the Current Population Survey, shows that the unemployment rate for persons with disabilities is almost twice the rate of the general population (13.4% compared to 7.9%). Also of note, the unemployment rate for African Americans with disabilities is significantly higher than whites with disabilities (20.8% compared to 12.3%).^{xviii}

The high unemployment rate for persons with disabilities stems from a range of factors including inaccessible workplaces, employer discrimination, and the cumulative effects of other disparities noted earlier in this paper such as educational disparities and inadequate transportation options. To create more equitable access to employment for persons with disabilities, our region will need to better understand the factors underlying the disparities and then work to implement policies and programs to address these issues.

We don't have adequate data on employment or median income for persons with disabilities in Portland, so it's not possible to map these patterns. We know from the American Community Survey that persons with disabilities earn about two-thirds as much as non-disabled persons (\$19,735 compared to \$30,285).^{xix} We also know that 23% of persons with disabilities live in poverty (compared to a poverty rate of 15% for non-disabled persons ^{xx}.)

Health Outcomes

Overall, persons with disabilities report significantly worse health than the general public, and minorities with disabilities report significantly worse health than whites with disabilities.^{xxi} Persons with disabilities are also significantly less likely to seek health care due to cost than the general population.^{xxii}

As the health care system is transformed nationally through the Affordable Care Act and regionally through the implementation of Coordinated Care Organizations, addressing these disparities should be a top priority. This will require the collection of data from persons with disabilities on issues of access, affordability, and quality of health care, as well as coordinated efforts to address the identified barriers.

Gender and disability

We don't have adequate data for gender and disability in the Portland metro region, but studies elsewhere have highlighted inequities for women with disabilities in education, employment, income, and health outcomes. In addition, women with disabilities are often in more vulnerable situations when it comes to abuse and violence. The International Network of Women with Disabilities researched and published a study on violence against women with disabilities in 2011. While their study was global in focus, they also cited several studies on abuse and violence specific to the United States. They cited one study which showed that 25-31% of all women with disabilities reported abuse of some kind, and that women with disabilities were vulnerable to abuse by personal attendants, health care providers, family members as well as by strangers.xxiii

Race and disability

We also don't have adequate data on race and disability in the Portland metro region. However, some locally based organizations have shown there are higher rates of disability for African Americans than for whites. For example, the Urban League, in its State of Black Oregon report, states: "32 percent of Black adults report having a physical disability that substantially limits basic physical activity, compared with 21 percent of White adults."^{xxiv} As discussed above, people of color with disabilities suffer even higher rates of unemployment and poorer health than the already high rates among white people with disabilities.

This is in line with national data that show a higher percentage of people of color are persons with disabilities.^{xxv} As Portland becomes less white over the next twenty years, we are likely to see an increase in the number of persons with disabilities due to this demographic shift. It is worth noting that women of color have higher rates of disability than men of color, so a more comprehensive approach, looking at the intersection of race, gender and disability, is recommended.

Conclusion

Analyzing equity conditions for persons with disabilities has been made more difficult by the lack of consistent definitions of disability and insufficient data on the socio-economic conditions for persons with disabilities. Despite the lack of comprehensive data, however, it is clear that persons with disabilities in our region face significant disparities. The lack of data should not delay the development of policies and programs to address inequities and should not be an excuse for inaction (i.e. the view that we can't undertake action until we have better data). Instead, efforts to gather better data can happen at the same time that policies and programs are put in place to address inequities.

The City of Portland has already taken some commendable steps. The Office of Equity and Human Rights (OEHR) has been structured in recognition of the inequities for persons with disabilities and persons of color. Likewise, the City of Portland has passed a resolution proclaiming the City as a Model Employer of persons with disabilities and has begun to discuss plans for gathering data on the number of employees with disabilities in different bureaus.

There is much work still to be done. Questions on disability should be integrated into existing data collection mechanisms to enable better disaggregation and analysis. Bureaus should have a set percentage of their budget that is earmarked to facilitate inclusion. This includes providing materials in alternative formats, sign language interpretation, renovation and retrofitting of public buildings for physical accessibility, etc. (In the field of international development, organizations of persons with disabilities recommend setting aside between 6-10% of the overall budget for measures such as these to promote greater inclusion^{xxvi}.) Persons with disabilities, through representative organizations as well as the Portland Commission on Disability, should be consulted to provide guidance to the City on measures for inclusion. Public-private partnerships should be structured in such a way as to have provisions that promote equity for persons with disabilities. With respect to education, further investigation is needed to understand the conditions and experiences of students with different types of disabilities, in order to develop strategies that ensure that every student has access to a quality education.

Policy makers, bureau management and staff need to understand that disability is but one of many identity markers. Gender, race, socio-economic status, sexual orientation, age and other markers also influence any particular individual's circumstances, opportunities and resources. For this reason, we need policies and programs that promote a more integrated or holistic approach when addressing the legacies of discrimination.

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- v. United States Census Bureau. (2012). 2009- 2011 American Community Survey, Tables B18102 -B18107 (3-year estimates). Retrieved from http:// factfinder2.census.gov/faces/nav/jsf/pages/ searchresults.xhtml?refresh=t#none. Note: Data is not reported for the age group Under 5 as the sample size is too small.
- vi. For estimates on percentages of persons with disabilities amongst different races, see: (1) Ward, Brian W. Ph.D.; & Schiller, Jeannine S. (2011). Prevalence of Complex Activity Limitations Among Racial/Ethnic Groups and Hispanic Subgroups of Adults: United States, 2003-2009, NCHS Data Brief – number 73. Retrieved from: http://www.cdc.gov/nchs/data/databriefs/db73.pdf; (2) Yee, Silvia. (2011). Health and Health Care Disparities Among Persons with Disabilities. Disability Rights & Education Defense Fund. Retrieved from: http://dredf. org/healthcare/Health-and-Health-Care-Disparities-Among-People-with-Disabilities.pdf and (3) Urban League of Portland. (2009). State of Black Oregon, p.68. Retrieved from: http://ulpdx.org/wp-content/ uploads/2012/04/UrbanLeague-StateofBlackOregon. pdf

Note: The lower and upper limits for the ranges come from the sources cited above.

- vii. United States Census Bureau. (2012). Disability Statistics, 2000. Retrieved from: http://www.census. gov/hhes/www/disable/disabstat2k/table2.html Note: Data from the 2000 Census indicates that Native Americans or Alaska Natives and Native Hanaiians or Pacific Islanders have higher incidences of disability, but since that data was collected 10 years earlier, it is not included in this table.
- viii. For calculating the total percentages I am using the total of the four races for which we have estimates on the percentage of persons with disabilities (total 577,320) not the total population of all races/ethnicities (583,776) since we don't have information on disability rates amongst other population groups. Numbers don't add up exactly to 100% since some persons identify as more than one race/ethnicity, and because the Census defines Hispanic/ Latino as an ethnicity rather than a race.

- ix. See, for example, the Boston-based organization, Institute for Human Centered Design, for information on universal design: http:// humancentereddesign.org
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Note: compare the discrepancy between this data estimate (15%) with the estimate on page 2 from ACS (6%) for people aged 5-17. This illustrates the lack of consistent data on persons with disabilities.

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